DISCLOSURE DIVISION

☑ WAIVER REQUEST	DATE: 7/16/2021			
□ANSWER				
☐ RECONSIDERATION REQUEST	DOCKET #:	2021-679		
HINTIMELV		0 - 0		

Ashley Wimberley, Director Disclosure Division

FILER INFORMATION

Name: Mr. George V. Jackson, III

Address: 618 Florissant Highway, St. Bernard, LA 70085

Office/Position: Crab Task Force

of Disclosures/Amendments Filed with Agency: 5

Years Covered: 2016-2020

Final Report: No

REPORT INFORMATION

Name of Report: Tier 2.1 Annual Personal Financial Disclosure covering calendar year 2019

Report ID: PFD21003682 Original Due Date: 7/6/2020

NOD Received: 3/17/2021 - Signed by: Unable to Determine

PFD/Answer Due Date based on NOD:3/26/2021

PFD/Answer Filed: 4/21/2021

LATE FEE INFORMATION

Amount of Late Fee: \$1300
Days late from receipt of NOD: 26
Total days late from initial due date: 289
Late Fee Order Received: 5/6/2021

Payment/Waiver Request Due Date: 5/26/2021

Waiver Request Received: 5/20/2021

COMMENTS:

George V. Jackson, III, is requesting a waiver for the late filing of his 2019 PFD. Mr. Jackson stated he faxed his disclosure on time, but unfortunately to the wrong fax number. He did not realize it until he received the Late Fee letter and contacted the BOE. He recently has been diagnosed with cancer, hospitalized, and is scheduled to have surgery. Mr. Jackson stated this was an honest mistake as he mistyped the fax number (which was 1 number off). This is Mr. Jackson's first late fee assessment.

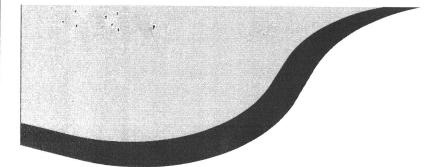
OTHER LATE FEE INFORMATION

Disclosure Statements:

- Other Outstanding Statements: NoOther Outstanding Late Fees: No
- Prior Late Fees: No
- Reassessed Late Fees: No

Campaign Finance:

- Outstanding Late Fees: No
- Prior Late Fees: No



618 Florissant Hwy St Bernard. LA 70085 504.628.3707 Jackson1957.gj@gmail.com

May 13,2021

Dear Ethics Board,

Re: 2019 George V Jackson III Financial Disclosure Fee Waiver Request

In error the 2019 Financial Disclosure was attempted and faxed to 225.301.7221 on February 9,2020 at 12:57 pm. This fax number should have been 225.301.7271.

I have been filing my financial disclosures since 2017. In that time frame I have had absolutely no issues. I always file my financial information on time.

Late last year I was diagnosed with cancer. I recently spent days in the hospital. I am currently home preparing to have surgery later this month.

I humbly ask if the ethics board would please take under advisement and waive the 2019 Financial Disclosure Fees.

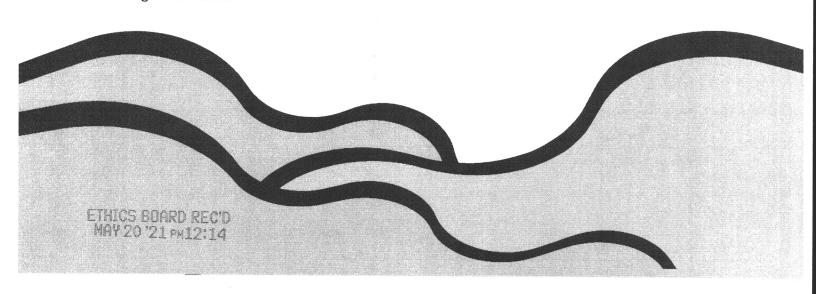
I apologize for any inconvenience this may have caused. I cannot stress enough I do not miss deadlines I made an honest mistake by one number off on the fax machine. I only wish I had received delinquent penalties for 2019 way before now. I could have had the opportunity to correct the issue before I incurred \$1,300.00 in fees.

Any help in this matter is greatly appreciated.

Sincerely,

George V Jackson III

George V Jackson III



Ashley Wimberley

From:

Lisa F. Ford

Sent:

Thursday, May 20, 2021 11:40 AM

To: Subject: Ashley Wimberley FW: Waiver Request

Attachments:

Waiver Request 2019 G Jackson III.pdf

For you...

From: Lynne Hickman [mailto:lynne_hickman@yahoo.com]

Sent: Wednesday, May 19, 2021 1:43 PM

To: Lisa F. Ford <LisaF.Ford@la.gov>; George Jackson <jackson1957.gj@gmail.com>

Subject: Waiver Request

EXTERNAL EMAIL: Please do not click on links or attachments unless you know the content is safe.

Lisa

Please find attached the waiver request for George V Jackson III.

Should you need any further information please do not hesitate to let me know.

Thank You

Lynne Hickman for George V Jackson III

TRANSMISSION VERIFICATION REPORT : 02/09/2020 12:57PM TIME NAME FAX SER.# : U64962H9H990521 DATE, TIME FAX NO./NAME 02/09 12:47PM 12253817221 — 00:04:00 DURATION PAGE(S) 13 OK NOTOUR RESULT MODE F. Ford @ (a, 950)

AHN: Ethics Bueras From: George V. Jackson III

Post Office Box 4368 Baton Rouge, Louisiana 70821

RSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)

GENERAL INFORMATION

- ❖ You are required to file a Tier 2.1 Personal Financial Disclosure Statement if you are a member (or designee) of a board or commission that has the authority to expend, disburse, or invest \$10,000 or more of funds in a fiscal year, and members of the State Civil Service Commission and the Louisiana Stadium and Exposition District Board of Commissioners.
- ❖ Board or Commission shall mean:
 - o A board or commission (and like entity) created by law or executive order that is made a part of the executive branch, or that is placed in an executive branch department or in the office of the governor or lieutenant governor by law or executive order.
 - o A board, commission (and like entity) created by the constitution, by law, by a political subdivision, or jointly by two or more political subdivisions as a governing authority of a political subdivision of the state or local government.
- ❖ Board or Commission shall not mean:
 - The governing authority of a parish.
 - o Any board or commission that governs a political subdivision created by a single parish governing authority of a parish with a population of 200,000 or less, or any sub-district of such a political subdivision.
 - The governing authority of a municipality.
 - Any board or commission that governs a political subdivision created by a single municipal governing authority of a municipality with a population of 25,000 or less, or any sub-district of such a political subdivision.
 - o A board of directors of a private nonprofit corporation that is not created by law.
- You are required to file a financial disclosure statement on or before May 15 of each year you hold office, AND by May 15 of the year following the termination of the holding of such office.
- You are only required to complete schedules that are applicable to your personal financial status. If additional copies of the schedules are needed, copies are available at www.ethics.la.gov.
- If you hold another office that requires you to file a financial disclosure statement, you are only required to file one financial disclosure statement. The financial disclosure statement shall be filed under the highest tier. Tier levels (highest to lowest): Tier 1, Tier 2, Tier 2.1, Tier 3.
- You may not request an extension to file your personal financial disclosure statement.
- ❖ If your holding of office ends in January, you may file your "final" personal financial disclosure statement for the days served in January, if the disclosure statement is filed on or before May 15 of the year in which your service ends. By filing this "final" personal financial disclosure statement, you are not required to file the year following the termination of the holding of such office.
 - For additional information, call our office at 225-219-5600 or visit our website. www.ethics.la.gov, and view the Disclosure -- Frequently Asked Questions section or the information sheets provided under General Information -- Publications.
 - Acceptable methods for filing a personal financial disclosure statement:
 - o Fax: 225-381-7271
 - o Mail: Board of Ethics, Post Office Box 4368, Baton Rouge, Louisiana 70821
 - Commercial or Hand-delivery: 617 North Third Street, LaSalle Building, Suite 1036, Baton Rouge, LA 70802
 - Upload via agency website: <u>www.ethics.la.gov</u> (pdf format only)

Revised November 2014

Form 417

www.athice ia any



LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule A: Employment Information

Check if not applicable OFiler OSpouse OFull-Time OPart-Time Name of Employer: Job Description: OFull-Time OPart-Time OFiler OSpouse Name of Employer: Job Description: OFiler OSpouse OFull-Time OPart-Time Name of Employer: Job Title: Job Description: OFiler OSpouse OFull-Time OPart-Time Name of Employer: Job Title: Job Description:_____

- You are required to disclose employment information related to both you and your spouse (if applicable).
- · List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.
- Self-employment information is reported on Schedule B.



LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule B: Positions - Business

☐ Check if not applicable

Filer OSpouse OBoth
Amount of Interest (where interest exceeds 10%):
Name of Business: DRORD V Jackson TIT
Address: 618 Horissant Hwy
City, State, Zip: Strand, LA 70085
Business Description: Commercial, Tipherman
Nature of Association: @WWW
OFiler OSpouse OBoth
Amount of Interest (where interest exceeds 10%):%
Name of Business:
Address:
City, State, Zip:
Business Description:
Nature of Association:
OFiler OSpouse OBoth
Amount of Interest (where interest exceeds 10%): %
Name of Business:
Address:
City, State, Zip:
Business Description:
Nature of Association:

^{*} You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

^{* &}quot;Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

(3)

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule C: Positions - Nonprofit

Check if not applicable

OFiler OSpouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
OFiler OSpouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:
OFiler OSpouse
Name of Organization:
Address:
City, State, Zip:
Nature of Association:
Description of Organization:

^{*}You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.

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LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule D: Other Offices/Positions Held

Check if not applicable

Name of Office/Position:	
Name of Office/Position:	

^{*}You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2.1 or 42:1124.3.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule E: Income from the State, Political

Check if not applicabl	Subdivisions, and/or Gaming Interests				
OFiler OSpouse	□ Business (where amount of interest exceeds 10%)				
	Type of Income: OState OPolitical Subdivision OGaming Interest				
Name of Business (if app	licable):				
Address:					
City, State, Zip:					
	dollar amount): \$				
OFiler OSpouse	DBusiness (where amount of interest exceeds 10%)				
Modern Control of the	Type of Income:				
Name of Business (if app	olicable):				
Name of Income Source					
Address:					
City, State, Zip:					
Amount of Income (exact dollar amount): \$					
OFiler OSpouse	Business (where amount of interest exceeds 10%)				
	Type of Income:				
Name of Business (if applicable):					
Name of Income Source					
Address:					
City, State, Zip:					
Amount of Income (exact dollar amount): \$					

*"income" (for a business) means gross income less costs of goods sold, and operating expenses.

^{*} You are required to complete SCHEDULE E if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

^{*} Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

^{*} The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

Schedule F: Contributions

Check if not applicable (made within one year of appointment - in excess of \$1,000)

Date of Appointment: Compensation: \$ Candidate Name: Amount of Contribution or Loan: \$
Date of Appointment: Compensation: \$ Candidate Name: Amount of Contribution or Loan: \$
Date of Appointment: Compensation: \$ Candidate Name: Amount of Contribution or Loan: \$
Date of Appointment: Compensation: \$ Candidate Name: Amount of Contribution or Loan: \$
Date of Appointment: Compensation: \$ Candidate Name: Amount of Contribution or Loan: \$

^{*} You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1124.2.1 and you made a contribution or loan in excess of \$1,000 to the campaign of the official who appointed you.

*You are only required to disclose contributions or loans made within one year of appointment.

[&]quot;Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office. "Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.

^{*&}quot;Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.

LYNNE HICKMAN

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL)

GENERAL INFORMATION

- You are required to file a Tier 2.1 Personal Financial Disclosure Statement if you are a member (or designee) of a board or commission that has the authority to expend, disburse, or invest \$10,000 or more of funds in a fiscal year, members of the State Civil Service Commission and the Louisiana Stadium and Exposition District Board of Commissioners, and the executive director or person holding the equivalent position of each state and statewide retirement system.
- Board or Commission shall mean:
 - A board or commission (and like entity) created by law or executive order that is made a part of the executive branch, or that is placed in an executive branch department or in the office of the governor or lieutenant governor by law or executive order.
 - A board, commission (and like entity) created by the constitution, by law, by a political subdivision, or jointly by two or more political subdivisions as a governing authority of a political subdivision of the state or local government.
- Board or Commission shall not mean:
 - The governing authority of a parish.
 - Any board or commission that governs a political subdivision created by a single parish governing authority of a parish with a population of 200,000 or less, or any sub-district of such a political subdivision.
 - The governing authority of a municipality.
 - Any board or commission that governs a political subdivision created by a single municipal governing authority of a municipality with a population of 25,000 or less, or any sub-district of such a political subdivision.
 - A board of directors of a private nonprofit corporation that is not created by law.
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- Acceptable methods for filing a personal financial disclosure statement:

Fax: 225-381-7271

- Mail: Board of Ethics, Post Office Box 4368, Baton Rouge, Louisiana 70821
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- Upload: Instructions for uploading are on the agency website (www.ethics.la.gov) (pdf format only)
- Electronic Filing: Instructions for electronic filing are on the agency website (www.ethics.la.gov)

Revised December 2016

Form 417

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

Department of the Treasury
Internal Revenue Service (99)
Attach to Form 1040, 1040-SR, 1040-NR, or 1041; pertnerships generally must file Form 1040, 1040-SR, 1040-NR, or 1041; pertnerships generally must file Form 1040, 1040-SR, 1040-NR, or 1041; pertnerships generally must file Form 1040, 1040-SR, 1040-NR, or 1041; pertnerships generally must file

Attachment

	le of proprietor					The State and must me			êquance N	4o. 09
Ge	orge V Jackson, III						Socie	il security n	umber (SS	SN)
A	Principal business or profess	sion in	duding product				433	3-98-74	80	
	Commercial Fisher		sideling product or service ((see ins	structions)			ter code from		Alber .
c							1			1 1 10
_	Business name. If no separa	te busi	ness name, leave blank.				D Em	<u> </u>	1 4 1	1110
Ē							L Carr	ployer ID nun	aber (EIN)	(see instr.)
_	Business address (including	suite o	r room no.) ➤ 618 Fl	oris	sant Hw					
	ony, town or post office, sta	te, and	ZIP code St Bern	nard.	T 7 70	AAC				
F		X Cas								***************************************
G	Did you "materially participal	te" in th	20 Apperation of this burning		Other (spe					***************************************
н	Did you "materially participa" If you started or acquired this Did you make any payments	a busin	ne operation of this busines	s durin	g 2020? if	"No," see instructions for li	mit on	osses	X Yes	No
1	Did you make any acquired (iii	a nasili	ess during 2020, check her	е.						
J	Did you make any payments If "Yes," did you or will you fi	in 2020) that would require you to	file For	m(s) 1099?	See Instructions	٠.		LJ Voc	
	If "Yes," did you or will you fi rt I Income	le requ	ired Form(s) 1099?	. ,		, ,			X 168	
	ici income								× Yes	_ □ No
1	Gross receipts or sales. See Form W-2 and the "Statutory	instruct	tions for line 1 and check to	ne hov	if this issue					
						me was reported to you on	-			
2	Returns and allowances .			OHOUNE	· .		1		34	,973.
3	Subtract line 2 from line 1						2			
4	Cost of goods sold ffrom line	40)		٠			3		34	,973.
5	Cost of goods sold (from line	f 15					4	-		,,,,,,
6	Gross profit. Subtract line 4 Other income, including feder	mom ill	nes,				5		34	,973.
7							6		24	. 313.
Par							7			
		enses	for business use of you	ur hon	ne only o	n line 30			34	,973.
8	· · · · · · · · · · · · · · · · · · ·	8		18						
9	Car and truck expenses (see			19	Done!	(pense (see instructions)	18			
	instructions).	9		1	rension :	and profit-sharing plans .	19			
10	Commissions and fees	10		20	Hent or	ease (see instructions):				
11	Contract labor (see instructions)	11	0.444	a	Vehicles,	machinery, and equipment	20a			
12	Depletion	\vdash	9,000_	d	Other bu	siness property	206			B-844
13	Depreciation and section 179	12		21	Repairs	and maintenance	21			
	expense deduction (not			22	Supplies	(not included in Part III)	22			
	included in Part III) /coo			23	Taxes an	d licenses				
	instructions) , .	13	0.	24	Travel an		23		1,	.008
14	Employee benefit programs			a						
	(other than on line 19).	14		-			24a			
15	Insurance (other than health)	15		b	Deductib	le meals (see				
16	Interest (see instructions):				INSTRUCTIO	กร)	24b			
а	Mortgage (paid to banks, etc.)	16a		25			25		1,	860.
b	Other	16b		26	Wages (le	ess employment credits) ,	26			
17	Legal and professional services		luit.	27a	Other exp	enses (from line 48)	27a		10	984.
28	Total processional services	17		ь	-		27b		10,	304.
29	Total expenses before expens	es for	ausiness use of home. Add	lines 8	through 2	7a	28		22	CAA
30	The profit of Gogal, Shift	act iine	28 from line 7				29	-		644.
ou	Expenses for business use of unless using the simplified met	your h	ome. Do not report there	exper	ises elsewi	hero Attach Carra nono	28		11,	329.
						uple: Wiracii Lottii 9858				
	Simplified method filers only:	Emter t	he total square footage of	(a) vour	home:					
	and (b) the part of your home u	sed for	business:				1			
	Method Worksheet in the instru	ctions	to floure the amount to			. Use the Simplified				
31	Net profit or (loss). Subtract li	ne 30 f	rom line 29	er Ou III	ne 30 .		30			
	. If a profit, enter on both Sal	nachila	1 (Farma 4040)			, i				
	 If a profit, enter on both Sci checked the box on line 1, see 	instale	tions) Estates and the 3, and	d on S	chedule SI	E, fine 2. (If you				
	checked the box on line 1, see If a loss, you must go to line	32		nier on	Form 104	1, line 3.	31		1.1.	329.
32	If you have a loss chock the L		, 		į	,				
 If you have a loss, check the box that describes your investment in this activity. See instructions. If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule 										
	- It you checked 32a, enter th	e loss d	on both Schodulo 4 (Easy)							
	. () or our control tile Di	ox on lir	te 1, see the line 31 instruct	ions). E	states and	trusts, enter on	32a 🔀	All invest	ment la -	ا مثماء
	, ,,,,,,				:		32h	Some inv	estment	r tiak.
	If you checked 32b, you must be like the second and second an	t attach	Form 6198. Your loss ma	y be lin	nited.	J	~eu [_	at risk.	COLLINECTE	is not
or Pap	erwork Reduction Act Notice,	see th	e separate instructions							

Schedule C (Form 1040) 2020

4

Par	Cost of Goods Sold (see instructions)	Page
33	Method(s) used to	
34	value closing inventory: a Cost b Lower of cost or market c Other (att Was there any change in determining quantities, costs, or valuations between opening and closing invento If "Yes," attach explanation	ach explanation)
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35
36	Purchases less cost of items withdrawn for personal use	36
37	Cost of labor. Do not include any amounts paid to yourself	37
38	Materials and supplies	38
39	Other costs.	39
40	Add lines 35 through 39	40
41	Inventory at end of year	
42 Dor	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	
Part	Information on Your Vehicle. Complete this part only if you are claiming car or and are not required to file Form 4562 for this business. See the instructions for life Form 4562.	
43	When did you place your vehicle in service for business purposes? (month/day/year)	· · · · ·
44	Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your ve	ehicle for:
a	Business b Commuting (see instructions) c Ot	
45	Was your vehicle available for personal use during off-duty hours?	Yes No
46	Do you (or your spouse) have another vehicle available for personal use?	Yes No
47a	Do you have evidence to support your deduction?	Yes 📋 No
ь Part	If "Yes," is the evidence written?	Yes 🔲 No
	de la	30.
Fue	e1	5,293.
Ice	2	998.
Mul	let and Skimmer Nets Trade supplies	1,198.
Bai	t	3,495.
46	7-4-1-4	
40	Total other expenses. Enter here and on line 27a	18 10.984

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING



Taxpayer:

George V Jackson, III

Primary SSN:

433-98-7480

Federal Return Submitted:

April 20, 2021 06:07 PM PDT

Federal Return Acceptance Date:

Your return was electronically transmitted on 04/20/2021

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.

The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filling date if the date of the electronic postmark is on or before the date prescribed for filling of the federal individual income tax return.

TIMELY FILING:

For your federal return to be considered filed on time, your return must be postmarked on or before midnight May 17, 2021. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone and you electronically file your return at 9 AM on May 17, 2021, your Intuit electronic postmark will indicate May 17, 2021, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before May 17, 2021, and a corrected return is submitted and accepted before May 22, 2021. If your return is submitted after May 22, 2021, a new time stamp is issued to reflect that your return was submitted after the IRS deadline and, consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2021. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2021, and the corrected return is submitted and accepted by October 20, 2021.

2. THE ACCEPTANCE DATE.

Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.



STATE OF LOUISIANA DEPARTMENT OF STATE CIVIL SERVICE

LOUISIANA BOARD OF ETHICS

P. O. BOX 4368 BATON ROUGE, LA 70821 (225) 219-5600 FAX: (225) 381-7271 1-800-842-6630 www.ethics.la.gov

March 12, 2021

CERTIFIED MAIL

NO. 70200090000054003961

RETURN RECEIPT REQUESTED

George V. Jackson, III 618 Florissant Highway St. Bernard, LA 70085

RE: NOTICE OF DELINQUENCY - FAILURE TO FILE

Statement covering 2019 (originally due on June 8, 2020) Crab Task Force

Dear Mr. Jackson:

Pursuant to La. R.S. 42:1124.4, if a person fails to file a Personal Financial Disclosure Statement as required by 42:1124, 1124.2, 1124.2.1, or 1124.3; omits information; or files inaccurately, a Notice of Delinquency shall be issued. A review of our records indicates that we have not received your Personal Financial Disclosure Statement.

You have 7 business days from the date of receipt of this Notice to file your Tier 2.1 Personal Financial Disclosure Statement covering 2019, which was originally due on June 8, 2020, or to submit an Answer explaining why you feel you are not required to file a Personal Financial Disclosure Statement. Failure to file a Personal Financial Disclosure Statement or an Answer within the 7 business days will subject you to an automatic late fee of \$50 per day up to a maximum of \$1,500. Proof of timely filing is determined by the U.S. Postal Service postmark; receipt from the U.S. Postal Service; or receipt from a commercial delivery service.

The form for the Tier 2.1 Personal Financial Disclosure Statement (Form 417) is available on the Louisiana Board of Ethics website at www.ethics.la.gov. If you have any questions, you may contact me at 225/219-5600 or 800/842-6630.

Sincerely,

Lisa Ford

Lisa Ford

Program Compliance Officer

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